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ABSTRACT

The effectiveness and quality of health care provided for foreign students in the United States is a concern to many in the field of international education. Because foreign student advisors (FSA) have a cross-cultural perspective as well as a knowledge of the campus health system, they can play an important part in linking foreign students and health care providers. With the help of older foreign students, the FSA can encourage incoming students to participate in developing health services that meet their own needs. As the role of the advisor can be draining, the FSAS need to: (1) perceive themselves as only one component in the network of health care for foreign students; (2) build this network not only to meet the students' needs for health care but also as a support for themselves when emergency consultation or ongoing collaboration is indicated; and (3) obtain support from the professional organization, the National Association for Foreign Student Affairs (NAFSA), which can serve as a clearinghouse for programs, information, and contacts on other campuses in the health area. (EM)

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Cultural Factors Affecting Health Care for International Students: The Foreign Student Advisor's Role

The effectiveness and quality of health care provided for foreign students in the U.S. has been a growing concern to many in the field of international education. It is clear that cultural factors affect utilization and delivery of medical and psychological services, and that the problems involved are complex. Several different target groups are involved: students; health care providers; foreign student advisors, (and others) and each has its needs and responsibilities in the situation. This paper focuses on the critical role played by the foreign student advisor (FSA) in linking between student - consumers and health care providers; in attempting to deal with cultural and institutional/system barriers that each of the target groups may experience.

What are the special qualifications of the FSA for performing this role? What are his/her tasks?

1. The FSA knows foreign students from the time of their arrival on campus and is in a continuing position to build rapport with them individually and via their nationality groups. He/she serves as the anchor person for the foreign student, and helps to refer him to a health provider (an M.D., nurse, or counselor) when stress or illness arises. He/she is "there" for the student at subsequent critical times, or when the particular stress has eased.

The FSA understands that referral is more than a routine procedure. It depends on development of a sense of trust with the student; a working colleagual relationship with members of medical and counseling staff who are sensitive to cross-cultural issues; and the capacity to tune in to that moment when a student's persistent complaint of "stomach-ache" or "loneliness" needs the evaluation of another professional.

2. The FSA has information about cultural background of many students- although is not necessary expert on each specific culture. He/she has however the most important assets: a cross-cultural perspective, and the wherewithal for enhancing cultural understanding whenever indicated. As such, the FSA can serve as resource person to health providers who will be diagnosing and treating the student, helping to know the student more personally. He/she shares cross-cultural understandings with them; of the effect

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that culture shock may play in the student's symptomology, and the meaning of gestures and other non-verbal communications.

3. The FSA has knowledge of the campus health care system: how it works, what it does and does not provide. Knowing what the values and expectations are of medical and counseling staff, the FSA can anticipate the gaps in understanding that may exist when students arrive from countries where systems of care and beliefs about illness may be vastly different.

Foreign student advisors have a responsibility to build programs on health care services on campus and in the community at orientation time and other strategic points of the academic year, and link many persons in the network to contribute to those programs. From the strength of his relationships with foreign students he has a chief ally, namely, older foreign students who can help incoming students become familiarized with what exists, to bridge gaps in expectations, and to put it into their own terms and language. The additional benefit here is that this process encourages students to become agents for themselves, in the development of health services that meet their own needs.

In summary, the FSA's role in issues of health care is a complicated one, containing many strands that connect him to foreign students consumers, health care providers, and significant others in the network. Such a catalyst role has hidden dangers, i.e., that the FSA feels drained, without time and energy to do more than the basic commitment.. For him to feel reinforced several directions are proposed:

1. The need for the FSA to perceive himself as one of the constituents in the larger area of health care, each of whom has overlapping responsibilities for the well being of foreign students.

2. The need for the FSA to build the network not only to meet students' particular needs for health care, but as a support for himself in times when emergency consultation or ongoing collaboration are indicated.

3. The FSA needs back-up from his professional organization (NAFSA) which can serve as a clearinghouse for programs, information and contacts with colleagues on other campuses working in the health area.

Thus, the FSA is engaged in a continuing and uphill process to develop and improve a health care system on campus where students are seen not in terms of disease, but in the human experience of sickness; where biological, physiological and cultural factors are all given consideration. In this, the foreign student advisor, and all of those who work with cross-cultural eyes and perspectives, plays a considerable part.

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